Debtor 1	Amy M. Furmanek				
	First Name	Middle Name	Last Name		
Debtor 2 Spouse, if filing)	First Name	Middle Name	Last Name		
-					
inited States Ba	ankruptcy Court for the: EAS	TERN DISTRICT OF	MICHIGAN		
Case number	18-32855				Check if this is a
					amended filing
Official Fo	orm 106A/B				
Schedu	le A/B: Propert	: y			12/15
formation. If mo nswer every que	re space is needed, attach a sepa	arate sheet to this form	d people are filing together, both and the top of any additional page. You Own or Have an Interest In		
Do you own or	have any legal or equitable intere	est in any residence, b	uilding, land, or similar property?	•	
■ No. Go to Pa	rt 2.				
Yes. Where					
Part 2: Describe	Your Vehicles				
Cars, vans, to		o report it on <i>Schedul</i>	icles, whether they are register le G: Executory Contracts and U		ehicles you own that
omeone else dr	ves. If you lease a vehicle, also	o report it on <i>Schedul</i>	le G: Executory Contracts and L	Unexpired Leases. Do not deduct secured cl	·
Cars, vans, to No Yes	ves. If you lease a vehicle, also	o report it on <i>Schedul</i>	le G: Executory Contracts and Us	Unexpired Leases. Do not deduct secured cl	aims or exemptions. Put d claims on <i>Schedule D</i> :
Cars, vans, to No Yes 3.1 Make: Model: Year:	ves. If you lease a vehicle, also	who has an interest Debtor 1 only Debtor 2 only	le G: Executory Contracts and Uses	Do not deduct secured cl the amount of any secure Creditors Who Have Clair	aims or exemptions. Put id claims on Schedule D: ms Secured by Property. Current value of the
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Cars, vans, to No Yes 3.1 Make: Model: Year: Approxima Other infor Automo ecoboos 3.2 Make: Model: Year:	te mileage: mation: bile: 2016 Ford Mustang at 65,000 miles	who has an interest Debtor 1 only Debtor 1 and Debtor 1 only Check if this is (see instructions) Who has an interest Debtor 1 only Debtor 2 only Debtor 1 and Debtor 1 an	s est in the property? Check one ebtor 2 only the debtors and another s community property est in the property? Check one	Do not deduct secured of the amount of any secure Creditors Who Have Clare Current value of the entire property? \$14,000.00 Do not deduct secured of the amount of any secure Creditors Who Have Clare Current value of the	aims or exemptions. Put ad claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$14,000.00 aims or exemptions. Put ad claims on Schedule D: ims Secured by Property. Current value of the
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De	ebtor 1	Amy M. Furn	nanek	Case number (if known)	18-32855
5			the portion you own for all of your entries from Part 2, including and for Part 2. Write that number here		\$16,000.00
Pa	rt 3: Des	scribe Your Person	nal and Household Items		
D	o you ow	n or have any le	egal or equitable interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Example No	old goods and for es: Major appliand Describe	urnishings ces, furniture, linens, china, kitchenware		
			Mscellaneous items not exceeding \$475.00 per item		\$900.00
7.	■ No	es: Televisions ar	nd radios; audio, video, stereo, and digital equipment; computers, prin phones, cameras, media players, games	ters, scanners; music c	ollections; electronic devices
8.	Example □ No		figurines; paintings, prints, or other artwork; books, pictures, or other ans, memorabilia, collectibles	art objects; stamp, coin,	or baseball card collections;
			Miscellaneous items not exceeding \$475.00 per item		\$200.00
9.	Example No	ent for sports ares: Sports, photogonusical instru	graphic, exercise, and other hobby equipment; bicycles, pool tables, g	olf clubs, skis; canoes a	and kayaks; carpentry tools;
10.	■ No		, shotguns, ammunition, and related equipment		
11.	□ No		othes, furs, leather coats, designer wear, shoes, accessories		
			Miscellaneous items not exceeding \$475.00 per item		\$200.00
12.	□ No		velry, costume jewelry, engagement rings, wedding rings, heirloom jev	welry, watches, gems, ς	old, silver
			Misc. Jewelry		\$100.00
13.		rm animals les: Dogs, cats, b	pirds, horses		

☐ Yes. Describe.....

De	ebtor 1	Amy M. Furman	ek	Cas	se number (if known)	18-32855
14.	Any ot ■ No	her personal and ho	ousehold items you did	not already list, including any health aids	s you did not list	
		Give specific informa	ation		ı	
15				art 3, including any entries for pages you	ı have attached	\$1,400.00
Pa	rt 4: De	scribe Your Financial	Assets			
Do	o you ov	vn or have any legal	or equitable interest in	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	■ No		in your wallet, in your ho	me, in a safe deposit box, and on hand whe	en you file your petitio	on
17.	Exam _l	institutions. If yo		unts; certificates of deposit; shares in credit with the same institution, list each. Institution name:	t unions, brokerage h	nouses, and other similar
	■ Yes					
		1	7.1.	The State Bank Checking - 100.00		\$100.00
19.	■ No □ Yes Non-pu		Institution or issuer	kerage firms, money market accounts name: prated and unincorporated businesses, in	ncluding an interes	t in an LLC, partnership, and
	■ No □ Yes.	Give specific informa	ation about them Name of entity:		of ownership:	
	Negoti Non-n ■ No	<i>iable instruments</i> incl	ude personal checks, cas s are those you cannot tra	tiable and non-negotiable instruments hiers' checks, promissory notes, and money nsfer to someone by signing or delivering the		
	Exam _l ■ No	ment or pension accoles: Interests in IRA,	counts ERISA, Keogh, 401(k), 4	03(b), thrift savings accounts, or other pens	ion or profit-sharing	plans
22.		ty deposits and pre		Institution name: that you may continue service or use from	a company	
	Exam _l ■ No			Institution name or individual:		iles, or others
			periodic payment of mone	y to you, either for life or for a number of ye	ars)	
	☐ Yes	lssuer	name and description.			
24.	Interest 26 U.S.	ts in an education IF C. §§ 530(b)(1), 529A	RA, in an account in a quality (b), and 529(b)(1).	ualified ABLE program, or under a qualifi	ied state tuition pro	gram.

Debto	r 1 Amy M. Furmanek		Case	number (if known) 18	3-32855
■ 1 □ \		nd description. Separately file the record	s of any interests.1	1 U.S.C. § 521(c):	
I	No	n property (other than anything listed	in line 1), and righ	ts or powers exercis	able for your benefit
	Yes. Give specific information about t	hem			
	<i>kamples:</i> Internet domain names, web	e secrets, and other intellectual propersites, proceeds from royalties and licens			
	Yes. Give specific information about t	hem			
	censes, franchises, and other general seamples: Building permits, exclusive li	ral intangibles censes, cooperative association holding	s, liquor licenses, p	rofessional licenses	
1	No Yes. Give specific information about t	hem			
Money	y or property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Ta	x refunds owed to you				
_		nem, including whether you already filed	the returns and the	tax years	
		2018 Tax refund recieved post Fed \$7900 SofM 300.00 recieved February 2019 - Bo			
		Truck - Paid bills, groceries			
		clothes and expenses after			
		no friend or family payment 13 payments	s -paid Ch		\$8,200.00
29. Fa	mily support				
_E	kamples: Past due or lump sum alimo	ny, spousal support, child support, maint	enance, divorce se	ttlement, property set	tlement
1 =	•				
П,	Yes. Give specific information				
	her amounts someone owes you xamples: Unpaid wages, disability insu benefits; unpaid loans you m	urance payments, disability benefits, sick	pay, vacation pay	workers' compensat	ion, Social Security
= 1		iddo to domesno dioc			
	Yes. Give specific information				
	erests in insurance policies kamples: Health, disability, or life insur	rance; health savings account (HSA); cre	edit, homeowner's,	or renter's insurance	
1 =	· ·				
<u></u> Ц `	res. Name the insurance company of Company i		Beneficiary:		Surrender or refund value:
lf :	y interest in property that is due yo you are the beneficiary of a living trust meone has died.	ou from someone who has died t, expect proceeds from a life insurance	policy, or are curre	ntly entitled to receive	property because
1 =	·				
	Yes. Give specific information				
_E	xamples: Accidents, employment disp	or not you have filed a lawsuit or madutes, insurance claims, or rights to sue	e a demand for pa	ayment	
	NO				

Debtor 1	Amy M. Furmanek		Case number (if known)	18-32855
☐ Yes.	Describe each claim			
■ No	contingent and unliquidated claims of every nature, inclu	ding counterclaims	of the debtor and rights to	set off claims
⊔ Yes.	Describe each claim			
■ No	nancial assets you did not already list Give specific information			
	the dollar value of all of your entries from Part 4, includin art 4. Write that number here	g any entries for pag	ges you have attached	\$8,300.00
Part 5: De	scribe Any Business-Related Property You Own or Have an Inter	est In. List any real esta	ate in Part 1.	
■ No. Go	own or have any legal or equitable interest in any business-related to Part 6. Go to line 38.	ed property?		
	scribe Any Farm- and Commercial Fishing-Related Property You ou own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
■ No.	own or have any legal or equitable interest in any farm- Go to Part 7. Go to line 47.	or commercial fishir	ng-related property?	
Part 7:	Describe All Property You Own or Have an Interest in That You	ı Did Not List Above		
Exam _l ■ No	n have other property of any kind you did not already list? ples: Season tickets, country club membership	?		
⊔ Yes.	Give specific information			
54. Add 1	he dollar value of all of your entries from Part 7. Write that	at number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
	1: Total real estate, line 2			\$0.00
	2: Total vehicles, line 5 3: Total personal and household items, line 15	\$16,000.00 \$1,400.00		
	4: Total financial assets, line 36	\$8,300.00		
	5: Total business-related property, line 45	\$0.00		
60. Part 6	6: Total farm- and fishing-related property, line 52	\$0.00		
61. Part 7	7: Total other property not listed, line 54 +	\$0.00		
62. Total	personal property. Add lines 56 through 61	\$25,700.00	Copy personal property to	stal \$25,700.00
63. Total	of all property on Schedule A/B. Add line 55 + line 62			\$25,700.00

Fill in this information to identify your case:							
Amy M. Furmane	k						
First Name	Middle Name	Last Name					
First Name	Middle Name	Last Name					
ankruptcy Court for the:	EASTERN DISTRICT C	DF MICHIGAN					
18-32855							
	Amy M. Furmanel First Name First Name ankruptcy Court for the:	Amy M. Furmanek First Name Middle Name First Name Middle Name ankruptcy Court for the: EASTERN DISTRICT C	Amy M. Furmanek First Name Middle Name Last Name First Name Middle Name Last Name ankruptcy Court for the: EASTERN DISTRICT OF MICHIGAN				

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Claim as I	Exempt									
1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	our spouse is filing with you.							
☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)											
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)									
2.	For any property you list on Schedule A/E	or any property you list on <i>Schedule A/B</i> that you claim as exempt, fill in the information below.									
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption						
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.							
	Automobile: 2016 Ford Mustang ecoboost 65,000 miles	\$14,000.00		\$0.00	11 U.S.C. § 522(d)(2)						
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit							
	2003 Dodge Dakota Line from Schedule A/B: 3.2	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(2)						
	Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit							
	Mscellaneous items not exceeding \$475.00 per item	\$900.00		\$900.00	11 U.S.C. § 522(d)(3)						
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit							
	Miscellaneous items not exceeding \$475.00 per item	\$200.00		\$200.00	11 U.S.C. § 522(d)(3)						
	Line from Schedule A/B: 8.1			100% of fair market value, up to any applicable statutory limit							
	Miscellaneous items not exceeding \$475.00 per item	\$200.00		\$200.00	11 U.S.C. § 522(d)(3)						
	Line from Schedule A/B: 11.1			100% of fair market value, up to							

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption		
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.			
	Misc. Jewelry Line from Schedule A/B: 12.1	\$100.00		\$100.00	11 U.S.C. § 522(d)(4)		
	Ellie II Gill Golleddie 77 D. 12-1			100% of fair market value, up to any applicable statutory limit			
	The State Bank Checking - 100.00	\$100.00		\$100.00	11 U.S.C. § 522(d)(5)		
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit			
	2018 Tax refund recieved post petition Fed \$7900 SofM 300.00	\$8,200.00		\$8,200.00	11 U.S.C. § 522(d)(5)		
	recieved February 2019 - Bought Truck - Paid bills, groceries, children clothes and expenses after job loss- no friend or family payments -paid Ch 13 payments Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit			
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/22 and every 3 ■ No			led on or after the date of adjustme	nt.)		
Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?NoYes							

Fill in this information to	o identify your case:	
Debtor 1	Amy M. Furmanek	
Debtor 2 (Spouse, if filing)		
United States Bankrupt	cy Court for the: EASTERN DISTRICT OF MICHIGAN	
	32855	Check if this is:
(If known)		An amended filing
		☐ A supplement showing postpetition chapter 13 income as of the following date:
Official Form	<u>106I</u>	MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job,		☐ Employed	☐ Employed
attach a separate page with information about additional	Employment status	■ Not employed	■ Not employed
employers.	Occupation	Care taker	
Include part-time, seasonal, or self-employed work.	Employer's name		
Occupation may include student or homemaker, if it applies.	Employer's address		
	How long employed th	nere?	

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 0.00 1.500.00 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. +\$ 0.00 0.00 Calculate gross Income. Add line 2 + line 3. 1,500.00 \$ 0.00

Case number (if known) 18-32855 Debtor 1 Amy M. Furmanek

			For	Debtor 1	For Debto non-filing			
	Copy line 4 here	4.	\$	1,500.00	\$	0.00		
5.	List all payroll deductions:							
	5a. Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	0.00		
	5b. Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00		
	5c. Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00		
	5d. Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00		
	5e. Insurance	5e.	\$	0.00	\$	0.00		
	5f. Domestic support obligations	5f.	\$	0.00	\$	0.00		
	5g. Union dues	5g.	\$	0.00	\$	0.00		
	5h. Other deductions. Specify:	5h.+	\$	0.00	+ \$	0.00		
6.	Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	0.00		
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,500.00	\$	0.00		
8.	List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00		
	8b. Interest and dividends	8b.	\$	0.00	\$	0.00		
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	: 8c.	\$	341.00	\$	0.00		
	8d. Unemployment compensation	8d.	\$	0.00	\$	0.00		
	8e. Social Security	8e.	\$	0.00	\$	0.00		
	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$	0.00		
	8g. Pension or retirement income	8g.	\$	0.00	\$	0.00		
	8h. Other monthly income. Specify:	8h.+	\$	0.00	+ \$	0.00		
9.	Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	341.00	\$	0.00		
40	October weather was Add Pro 7 - Pro 0	40		044.00	0.00			
10.	Calculate monthly income. Add line 7 + line 9.	10. \\$	1	,841.00 + \$_	0.00	= \$ 1,841.00		
11.	Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00							
12.	Add the amount in the last column of line 10 to the amount in line 11. The resulting Write that amount on the Summary of Schedules and Statistical Summary of Certa applies							
						Combined monthly income		
13.	Do you expect an increase or decrease within the year after you file this form No.	?				monthly income		
	Yes. Explain: \$10 hr part time 25 - 30 hrs							

Fill	in this informa	tion to identify yo	our case:					
	tor 1	Amy M. Furn				Che	eck if this is:	
		Ally Will ull	IIIIII				An amended filing	
	tor 2 buse, if filing)						A supplement show 13 expenses as of	wing postpetition chapter the following date:
``	, 0,	untay Court for the	· EASTE	RN DISTRICT OF MICHIG	: A N		MM / DD / YYYY	
			. EASIE	KN DISTRICT OF MICHIE	BAN		WIWI / DD / TTTT	
	e number 18 nown)	3-32855						
Of	fficial Fo	rm 106J						
Sc	chedule	J: Your	Exper	ises				12/15
info	rmation. If m		eded, atta	. If two married people ar ich another sheet to this n.				
Par		ibe Your House	hold					
1.	Is this a join							
	■ No. Go to			ata haysahaldO				
	☐ Yes. Doe		n a separ	ate household?				
	=	~	st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of De	btor 2.	
2.		e dependents?	_	, ,				
۷.	•	•	□ No	Fill and this information for	Daman danska nalasi		Daman danska	Dana danandant
	Do not list De Debtor 2.	eptor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state	the			_			□ No
	dependents	names.			Son		_ 7	Yes
					Daughter		17	□ No ■ Yes
								□ No
								☐ Yes
								□ No
								☐ Yes
3.		enses include f people other t	han I	No				
		d your depende		Yes				
Par	f 2: Fstim	ate Your Ongoi	na Month	ly Fynenses				
Est	imate your ex	penses as of yo	our bankr	uptcy filing date unless y y is filed. If this is a supp				
Incl	ude expense	s paid for with I	non-cash	government assistance i	f you know			
	value of such ficial Form 10		d have inc	cluded it on Schedule I: \	our Income		Your exp	enses
(0		·,						
4.		or home owners and any rent for the		ses for your residence. I or lot.	nclude first mortgage	e 4.	\$	250.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		rty, homeowner's				4b.	\$	0.00
				upkeep expenses		4c.	:	0.00
E		owner's associat			mo oquity loons	4d.	·	0.00
5.	Additional h	nortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	Φ	0.00

Official Form 106J Schedule J: Your Expenses 18-32855-jda Doc 34 Filed 04/17/19 Entered 04/17/19 12:32:01 Page 10 of 14

Official Form 106J Schedule J: Your Expenses 18-32855-jda Doc 34 Filed 04/17/19 Entered 04/17/19 12:32:01 Page 11 of 14

United States Bankruptcy Court Eastern District of Michigan

In re	Amy M	. Furmanek		Case No.	18-32855		
-	-	Debtor(s)		Chapter	7		
		STATEMENT OF ATTORNEY FO PURSUANT TO F.R.BANKR					
	The und	ersigned, pursuant to F.R.Bankr.P. 2016(b), states that:					
1.	The und	ersigned is the attorney for the Debtor(s) in this case.					
2.	The com	pensation paid or agreed to be paid by the Debtor(s) to the undersi	gned is: [Check or	ne]			
	[X]	FLAT FEE		_			
	A.	For legal services rendered in contemplation of and in connection exclusive of the filing fee paid		·1,	200.00		
	B.	Prior to filing this statement, received			400.00		
	C.	The unpaid balance due and payable is			800.00		
	[]	RETAINER					
	A.	Amount of retainer received					
	В.	The undersigned shall bill against the retainer at an hourly rate of agreed to pay all Court approved fees and expenses exceeding the			rly rate schedule.] Debtor(s) have		
3.	\$_335.00 of the filing fee has been paid.						
4.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: [Cross out any that do not apply.]						
	A.	bankruptcy;					
	B. C. D. E. F. G.	 D. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; E. Reaffirmations; F. Redemptions; 					
5.		ement with the debtor(s), the above-disclosed fee does not include conversion and \$800.00 balance represents post-petition services					
6.	The sour A. B.	rce of payments to the undersigned was from: Debtor(s)' earnings, wages, compensation for some Other (describe, including the identity of payor).		I			
7.	The undersigned has not shared or agreed to share, with any other person, other than with members of the undersigned's law firm or corporation, any compensation paid or to be paid except as follows:						
Dated:	April	17, 2019	/s/ John L				
			412 S. Sag 1st Floor Flint, MI 48	cks P4466 cks & Ass jinaw St. 3502			
Agreed:	/s/ Ar	ny M. Furmanek					
5		M. Furmanek					

Debtor

Debtor

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF MICHIGAN

COVER SHEET FOR AMENDMENTS

Case Name: Am	/ M. Furmanek	Case No.:	18-32855				
DESCRIBE INFORM	ATION BEING AMENDED BY CHEC	KING APPLICABLE BOX(ES) BE	LOW:				
Amendment to F Name □ □ Signature Summary of You Statement of Fir Schedules and L ✓ Schedule A/E ✓ Schedule C □ List of Credite □ Add cred debt - \$31 Fe	Petition: Debtor(s) Mailing Address Alias Complying with Order Directing the Assets and Liabilities and Certai Ancial Affairs List of Creditors:	e Filing of Official Form(s) n Statistical Information and eady on the List of Creditors, change					
✓ Schedule I							
✓ Schedule J☐ Schedule J-2							
NOTE: Use Page	E: Use Page 2 for any corrections or additions to the List of Creditors.						
Additional Details o	f Amendment(s): Amended sche chapter 7 after j	edules $\mathrm{B,C,\ I\ \&\ J}$ for changes in income loss.	ome and conversion to				
be relied up	DECLARATION OF ATTORNEY: I declare that the above information contained on this cover sheet may be relied upon by the Clerk of the Court as a complete and accurate summary of the information contained in the documents attached.						
Date April 3, 2019	Signature /s/ John L. Hicks						
→ AFFIRMATION the attached	DN OF DEBTOR(S): I declare under I schedules, lists, statements, etc., information and belief.						
Date April 3, 2019	Signature /s/ Amy M. Furmanek						

CORRECTIONS TO THE LIST OF CREDITORS

Use this section to make corrections to the name(s) and address(es) of any creditor(s) listed on the current schedules and List of Creditors.

PREVIOUS NAME/ADDRE	ESS OF CREDITOR:	PLEASE CHANGE TO: -NONE-	
	ADDITIONS TO	THE LIST OF CREDITORS	
Use this section to identify	y creditors added to the s	chedules and List of Creditors.	
NAME OF CREDITOR:			
ADDRESS:			
-			
NAME OF CREDITOR:			
ADDRESS:			
- -			
NAME OF CREDITOR:			
ADDRESS:			
-			

FOR ADDITIONAL CORRECTIONS/ADDITIONS, COPY THIS SHEET AND CONTINUE.